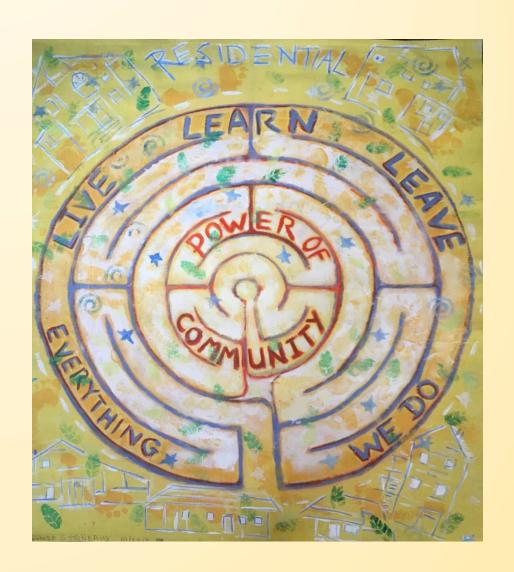
Adult Housing and Residential Supports



Live Learn Leave

- HCRS Residential Services programs are built on the belief in the power of community.
- We strive to move away from reliance on institutional language and expectations.
- We are building a life experience that can be summed up in three words, applicable to all people, wherever they may reside: "Live, Learn, Leave."
- Live meeting basic needs
- Learn developing skills and mastery
- Leave the next step
- Unifying values informed by Evidenced Based Treatment: Recovery Model, Stages of Change
- Incorporates Intentional Peer Support principles and tasks



Unifying Values and Principles

- ★ We believe that unlimited growth is attainable for all of us.
- ★ We view all experiences and situations as rich with opportunity and possibility.
- ★ We recognize that language both reflects and shapes our worldview. We aspire to find common and inclusive language with the goal of using our words to help and heal. While we sometimes use psychiatric diagnoses and other clinical language as part of a system that relies on these forms of communication, we do not necessarily limit our understanding of human experiences to these frameworks.
- ★ We come to our relationships with the belief that people are resilient and capable.
- We trust that in a safe and supportive enough environment people have a natural tendency towards growth.
- * We appreciate that there are many different causes of distress, including but not limited to; trauma, poor nutrition, existential crisis, grief or loss, hopelessness, physical illness, drug use, lack of social connections, exercise or sleep habits, spiritual emergency, stress, oppression, and unintended effects of medical or mental health treatment. We respect people's ability and right to determine which causes apply to their lives.

Unifying Values continued

- We accept that change requires risk and vulnerability. Change happens for different people at different paces and is rarely linear.
- ★ We believe that experiences such as fear, despair, grief, ecstasy, and unshared sensory perceptions are normal parts of the human experience and have the power to be transformative. We aim to operate under the assumption that "nothing is a problem unless it's a problem."
- * Throughout history many people who have cognitive, emotional, spiritual, or behavioral experiences outside of the cultural norms or ideals have experienced varying levels of oppression and human rights violations, often by systems intended to serve them. We acknowledge that we exist as part of a society recovering from this legacy and we strive to minimize the harm that can affect all of us as a result of this.
- ★ We promote choice and use a harm reduction approach whenever possible.
- We value the power of mutuality and look for ways in which wisdom, support and respect can flow in more than one direction in all our relationships.
- ★ We do not hold to one-size-fits-all solutions or explanations.

We hope to be a community in which we all take responsibility

Adult Residential Services Continuum

- Total of 38 beds in the continuum
- Residential homes provide residents with 24/7 staff support to develop:
 - Skills for community-based living.
 - Connections with health care providers.
 - Relationships with self and others.
 - Education and employment opportunities.
 - Recovery experiences.
- Residential continuum contains 5 state licensed programs of varying levels of support
- Continuum of care allows individuals to move between levels of care and maintain continuity of community and approach



What, Where, Who and How

PROGRAM	LOCATION	ТҮРЕ	WHO	RATIO	AWAKE NIGHT staff
ALTERNATIVES 802-885-7280	SPRINGFIELD 10 Lincoln St	L3 Crisis, hospital	Adults, HCRS, CRT. Non HCRS	2/1	yes
Fax 802-885-2683	VT 05156	diversion, Short Term	DMH approved		
HILLTOP 802-732-8343 Fax 802-732-8329	BELLOWS FALLS 94 Westminster Terrace VT 05101	L3 IRR intensive residential, transitional	18-26 y/o HCRS /non HCRS DMH	2/1	yes
MEADOWVIEW 802-275-4971 Fax 802-275-4973	BRATTLEBORO 330 Linden St. VT 05301	L3 IRR Intensive residential, transitional	approved Adults, all VT catchments, DMH approved	2/1	yes
BEEKMAN HOUSE 802-228-5434 Fax 802-226-8103	PROCTORSVILLE 3494 VT 103 VT 05153	TCR semi independent, transitional	HCRS CRT male No arson history	10/1	no
WOODSTOCK HOUSE 802-457-1845 Fax 802-209-1014	WOODSTOCK 1087 West Woodstock Rd. 05091	TCR semi independent ' transitional	HCRS CRT male and female	8/1	no

KEY:

- CRT=Community Rehabilitation and Treatment
- DMH= Dept. of Mental Health
- IRR= Intensive Recovery Residence
- L3= Level 3 Community Care Home
- TCR=Therapeutic Community Residence. Must be capable to be in community without staff.
- Transitional= 3 months to 2 years or less. Exceptions possible
- RATIO= resident/staff

Alternatives

Alternatives' Crisis Program offers six beds in a warm and welcoming environment of care for people to stay for short periods of time to receive emotional support, crisis stabilization, hospital diversion or step down, and care coordination before returning to independent community-based living.



10 Lincoln Street, Springfield, VT

Hilltop Recovery Residence

Hilltop is an eight-bed, home designed to serve young adults experiencing significant mental health and independent functioning challenges stepping down from inpatient psychiatric hospital stays or community referrals to prevent institutionalization.



94 Westminster Terrace, Westminster, VT

Meadowview Recovery Residence

Meadowview Recovery **Residence** is a six-bed home serving adults who are experiencing significant mental health and independent functioning challenges, who have extensive experiences in the mental health system, stepping down from inpatient psychiatric hospital stays.



330 Linden Street, Brattleboro, VT

Therapeutic Community Residences

Woodstock Therapeutic Residence is an 8-bed home in Woodstock. Beekman House is a 10-bed home in Proctorsville. These homes are for individuals in need of additional supports regarding independent living and mental health stability. Beekman and Woodstock provide supportive and therapeutic milieus for residents to work towards their recovery goals, while practicing independence in the community.



Beekman, Proctorsville, VT



Woodstock House, Woodstock, VT

Person Centered, Community Integration Based Care



It's all about the people:

- 18 year old single male, depressive symptoms, SI, developmental trauma, physical and verbal abuse perpetrated by step parent. Client's grandmother given custody of client at age 8. Tapered off all medications w/ benefit during admission. Client benefitted from milieu support, group, family, and individual therapy, and vocational support. Client at discharge presented in an active stage of change and discharged to own apartment, full time employment, outpatient treatment. Client has strong social supports and engages in community integration activities consistently.
- 24 year old single male, high school graduate admitted from inpatient psychiatric hospital on an ONH. Committed involuntarily for 9 months w/ involuntary medication prior to admission. Referred for further assessment and evaluation of symptoms of psychosis and impact on independent functioning. Client has had multiple hospitalizations with negligible results. Client has strong family support and economic resources. He endorses a contemplative/action stage of change with regard to overall functioning and mental health experiences. Client discharged with full symptom remission to his own apartment, fulltime employment and CRT support.
- 30 year old, single, homeless male. Hospitalized involuntarily after being taken into police custody for safety, appearing severely dehydrated and paranoid, after living outside for approximately a week. Since age 19, he has had multiple inpatient hospitalizations, most of which were involuntary. He was on an ONH and receives CRT services. Completedprogram, moved to an HCRS TCR, plans to get his own apartment.
- 34 year old, single, homeless male. He was admitted to HCRS residential after a 5.5 month involuntary hospitalization as a result of an ONH revocation. He has had at least 3 involuntary hospitalizations since coming to this area and was formerly in long term treatment. He was missing for a week from the program shortly after admission. His bed had been released, and he stayed at Alternatives to await placement, was re-admitted to program. During treatment, reconnected with natural supports and developed a supportive discharge plan to return home after completion of program. Successfully moved back to home state, to a job and housing with a past mentor.
- 26 year old single, homeless female. She was involuntarily hospitalized after being found by police wandering in the streets and became aggressive towards police. She has a past history of suicide attempts and self-harm. When not on medications, she has a history of violence towards other people including hitting and punching. She is not on an ONH and is now open to CRT services. She was hospitalized on an EE after punching a wall several times, threatening staff, and spitting at staff. Bed was held and she returned to program. Stabilized and was admitted to TCR program. Discharged from TCR to her own apartment and out patient services.

A Few Numbers

- Alternatives: 92 % overall capacity, averaged 153 admits annually over the last three reporting periods
- Hilltop and MRR: average 12-17 admits annually, above 90% overall capacity over last three years reporting period
- All five Programs combined averaged 85 % overall occupancy rate over last two years reporting period
- Individuals are served at about 40% the cost of hospital level of care or less, depending on the program

A few more numbers: Resident Survey Samples (2017)

- 80% of Hilltop residents reported that they developed tools to overcome obstacles during their stay
- 60 % of Hilltop residents reported they practiced skills of daily living that will prepare them for life after Hilltop.
- 100% of Meadowview residents surveyed reported that they were being sent the message that "I can achieve the life I want" while residing at Meadowview.
- 100% of Beekman and Woodstock Residents engage in independent community activities.
- 100% of Beekman and Woodstock Residents actively participate in weekly meal planning and preparation for household communal dinners.

Alternatives Client Satisfaction Survey Comments

- "Always nice to come to Alternatives for a short stay. Helps me to put my life back in balance. So happy there is a safe place like this."
- "I think that the entire staff does an amazing job at being creative and flexible, seeing us as individuals, all within an overwhelming one size fits all system - Thank you."
- "I really love the staff and this program. It really works well with me."
- "I want to thank everyone for their support in my time of need. I know if I need a safe place to come to for support it will be here again - Thank you."
- "I really love to come to Alternatives. They meet me where I am at-not where they want me to be."

Housing Supports

HCRS is a participant in Coordinated Entry across three regions, in collaboration with other community partners and housing organizations

Brattleboro

Springfield

Hartford

Housing Supports

- River House
- The Great River Terrace
- Kieve House
- Turning Point Recovery Center
- Myrtle Street
- Individual apartments with support